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Aerospace Medicine

**AGENCY FOR TOXIC SUBSTANCES AND
DISEASE REGISTRY PROGRAMS**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements AFPD 48-1, *Aerospace Medical Program*, and the 14 June 1993 Memorandum of Understanding (MOU) between the Department of Defense (DoD) and the Agency for Toxic Substances and Disease Registry (ATSDR). It provides directive requirements for Air Force (AF) activities related to ATSDR and applies to all personnel and operations at AF installations and activities, the Air National Guard, the AF Reserves, and Government owned-Contractor operated (GOCO) facilities. Send comments and suggested improvements on AF Form 847, **Recommendation for Change to Publication**, HQ AFMOA/SGPA 170 Luke Avenue, Suite 400, Bolling AFB, DC 20332-5113.

Section A—Background

1. Legal Mandate:

- 1.1. The Agency for Toxic Substances and Disease Registry (ATSDR) must perform public health assessments (PHA) and other health related activities under the *Comprehensive Environmental Response, Compensation and Liability Act (CERCLA) of 1980* and the *Superfund Amendments and Reauthorization Act (SARA) of 1986*. The law stipulates that ATSDR and DoD will enter into an agreement to conduct PHAs, toxicology profiles, and other health related activities.
- 1.2. PHAs, health consultations, health education, and health studies are being performed by ATSDR at Federal, DoD, and private facilities listed on the US Environmental Protection Agency's (EPA) National Priorities List (NPL) of hazardous waste sites.
- 1.3. ATSDR may also perform PHAs or health consultations at non-NPL sites when petitioned by private citizens.
- 1.4. While the ATSDR is not a regulatory agency, the EPA and other enforcement authorities (e.g., states) may adopt ATSDR recommendations as requirements.

Section B--Responsibilities

2. The Deputy Under Secretary of Defense (Environmental Safety) [DUSD(ES)]:

- 2.1. Funds ATSDR for ATSDR/DoD activities.
- 2.2. Provides policy review and overall direction for the ATSDR program and activities within DoD.

3. The Deputy Assistant Secretary of the Air Force (Environmental, Safety, and Occupational Health) (SAF/MIQ):

- 3.1. Provides policy review and overall direction for the ATSDR program and activities within the AF.
- 3.2. Actively participates with ATSDR in health related activities as identified in the DoD-ATSDR MOU.
- 3.3. Ensures the AF bases its ATSDR publications and activities on the best available information and reflect accurate interpretation and use of data.
- 3.4. Activities include, but are not limited to, cooperation with site visits, data collection and exchange, document review, and participation in professional, intra-agency, and public forums.

4. Headquarters US Air Force Surgeon General (HQ USA/SG):

- 4.1. Issues policy and administers the ATSDR programs for the AF.
- 4.2. Advocates MAJCOM plans, programs, and budgets which support the Medical Service requirements for ATSDR related activities.

5. The Air Force Civil Engineer (AF/CE):

- 5.1. Advises and assists with ATSDR activities.
- 5.2. Includes requests for resources to support ATSDR requirements/recommendations in Defense Environmental Restoration Account (DERA) budget submittals.

6. Headquarters Air Force Medical Operations Agency, Aerospace Medicine Division (HQ AFMOA/SGPA):

- 6.1. AF's ATSDR liaison.
- 6.2. Develops the AF program, policy, and coordination between the DoD ATSDR lead agent, DoD components, ATSDR, and AF offices.

7. Air Force Legal Services Agency, Air Force Law and Litigation Division (AFLSA/JACE).

Advises and assists with ATSDR activities.

8. Air Force Base Conversion Agency, Environmental (AFBCA/EV):

- 8.1. Advises and assists with ATSDR activities at closure bases.
- 8.2. Includes requests for resources to support ATSDR requirements for recommendations for closure bases in Base Realignment and Closure (BRAC) budget submittals.

9. Major Command Commander (MAJCOM/CC). Implements AF policy and establishes procedures for MAJCOM ATSDR program management.

10. Major Command Surgeons (MAJCOM/SG) and Air Reserve Components (ARC):

- 10.1. Consolidates, coordinates, and approves comments on ATSDR documents and forwards comments to SAF/MIQ through HQ AFMOA/SGPA
- 10.2. Coordinates and approves requests for extensions on document responses and requests for health consultations.
- 10.3. Monitors progress on recommendations and follow-up activities.

11. Major Command Bioenvironmental Engineer (BEE):

- 11.1. Coordinates ATSDR activities for the MAJCOM;
- 11.2. Provides oversight of ATSDR activities and apprises commanders of these activities.
- 11.3. Requests Armstrong Laboratory support when necessary.
- 11.4. Prepares ATSDR related correspondence.

12. Major Command Civil Engineering (CE), or When Applicable, Environmental Management (EM):

- 12.1. Advises and assists with ATSDR activities.
- 12.2. Incorporates, when applicable, ATSDR findings, conclusions, and recommendations into the IRP process.
- 12.3. Includes in budget submittals requests for resources to support ATSDR requirements/recommendations.
- 12.4. In the event of base closure, these activities will become the responsibility of AFBCA.

13. Major Command Judge Advocate (JA). Advises and assists with ATSDR activities.

14. Major Command Public Affairs (PA). Advises and assists with ATSDR activities.

15. Armstrong Laboratory/Occupational Laboratory (AL/OE):

- 15.1. Provides technical assistance teams to help installations prepare for ATSDR site visits.
- 15.2. Accompanies ATSDR during site visits.
- 15.3. Assists in transferring data to ATSDR.
- 15.4. Reviews responses to ATSDR reports.
- 15.5. Directly interfaces with ATSDR health assessor to discuss technical questions resulting from ATSDR documents.
- 15.6. Provides consultation services and program management functions for the purposes of providing consultation, oversight, and coordination of AF related ATSDR work and topics, such as toxicological profiles, pilot studies, health assessments, health advisories, data gap identification (and

services to fill data gaps if requested), epidemiological studies, disease registries, health surveillance studies, health consultations, case studies, emergency response, and health education.

16. United States Air Force School of Aerospace Medicine, Bioenvironmental Engineering (USAF-SAM/BE):

- 16.1. Provides education and training on ATSDR PHAs and other health activities.
- 16.2. Performs course oversight and programs for these requirements.

17. Installation Commander:

- 17.1. Responsible for the installation's interaction with ATSDR.
- 17.2. Signs review comments or responses on ATSDR documents.

18. Military Treatment Facility Commander. Reviews ATSDR documents and coordinates on responses to these documents.

19. Base Aerospace Medicine Division:

- 19.1. Interfaces with ATSDR team.
- 19.2. Reviews medical effects data.
- 19.3. Directs additional medical data collection.
- 19.4. Assesses biota and pathways.
- 19.5. Reviews ATSDR public health assessment documents.
- 19.6. Assists installation officials with communicating the AF position at community forums and provides risk communication.

20. Base Bioenvironmental Engineer (BEE):

- 20.1. Installation's ATSDR point of contact.
- 20.2. Coordinates ATSDR activities through the Medical Treatment Facility Commander.
- 20.3. Assembles and maintains an inventory of information sources and documents.
- 20.4. Provides information to ATSDR.
- 20.5. Advises ATSDR of security clearance requirements.
- 20.6. Prepares correspondence for the installation.
- 20.7. Apprises the commander, MAJCOM, and Armstrong Laboratory of ATSDR activities.
- 20.8. Provides technical assistance to CE/EM on ATSDR follow up actions.
- 20.9. Communicates health assessment and health risk to installation officials.
- 20.10. Supports installation officials at community forums.

21. Base Public Health (PH):

- 21.1. Interfaces with ATSDR team.
- 21.2. Assesses epidemiological and toxicological pathways.
- 21.3. Consults on health effects data.
- 21.4. Coordinates and assists with medical data collection.
- 21.5. Coordinates with state and local health officials.
- 21.6. Reviews ATSDR public health assessment documents.
- 21.7. Provides risk communication and health education.
- 21.8. Supports installation officials at community forums.

22. Base Civil Engineering (CE), or When Applicable, Environmental Management (EM):

- 22.1. Provides existing environmental and operational reports and data as requested to the Base BEE for ATSDR's use.
- 22.2. Advises and assists with ATSDR activities.
- 22.3. Incorporates, when applicable, ATSDR findings, conclusions, and recommendations into the Planning, Programming, and Budgeting System (PPBS) process (e.g. DERA, Operation and Maintenance).

23. Base Judge Advocate (JA). Advises and assists with ATSDR activities.

24. Public Affairs (PA). Advises and assists with ATSDR activities.

Section B—ATSDR Activities

25. ATSDR PHA:

25.1. Activities. Projects ATSDR's activities for a given year including initiation of PHAs, health studies, health consultations, and other activities.

25.2. Site Visits:

25.2.1. AL/OEMH may coordinate a site scoping visit when requested by the MAJCOM or installation point of contacts (POC). ***Note: The purpose of this site visit is to assess the available data, brief commanders, and recommend installation preparations for the ATSDR PHA.***

25.2.2. ATSDR's Division of Health Assessment and Consultation (DHAC) schedules installation site visits and follow-on data validation visits with the installation's POC.

25.2.3. ATSDR may make multiple site visits to collect data. Coordinate visit with the installation POC, who in turn will keep the commanders, and the MAJCOM informed of ATSDR activities.

25.3. Public Meetings:

25.3.1. As part of the PHA process, ATSDR conducts public forum meetings and public availability sessions on and off base. ***Note: The public forum involves panel discussions between ATSDR and the public.***

25.3.2. Base representatives should attend public forum meetings. Public availability sessions involve one-on-one discussions between individuals and ATSDR representatives.

25.3.3. The installation commander should determine any official AF representation at these meetings and coordinate with SG, CE, JA and PA.

25.4. Data Validation:

25.4.1. Before publishing the initial release - PHA (red cover) document, ATSDR conducts a data validation meeting with the installation to evaluate and clarify site data prior to incorporation into the PHA. *Note: Data validation is an important opportunity to ensure all data previously provided to ATSDR is accurate and includes clarifying descriptions or caveats regarding the data such as; the age of the data, known errors or inaccuracies of the data, presence or absence of quality assurance or quality control measures during the data collection or analyses, completeness of the data and the intended use of the data obtained.*

25.4.2. Returns ATSDR's draft documents to them immediately following data validation.

26. Health Consultations:

26.1. May initiate ATSDR health consultations based on findings during a public health assessment, in response to a petitioned request, or at the request of a DoD component or regulatory agency.

26.2. May request a health consultation at any time to address a public health concern regardless of the listing on the APOW.

26.3. Installations Currently Undergoing a PHA:

26.3.1. Installation commander can initiate a health consultation without modifications to the APOW provided the level of effort is within the scope of the PHA.

26.3.2. Installation commander submits requests, which are to include an estimate of the level of effort, to the MAJCOM/SG, with copies to HQ AFMOA/SGPA and AL/OEM.

26.3.3. ATSDR's Division of Health Assessment and Consultation (DHAC) provides the final coordination and approval.

26.4. At Installations Where PHAs are Not Underway:

26.4.1. Installation commanders submit health consultation requests to the MAJCOM/SG, with copies to HQ AFMOA/SGPA and AL/OEM.

26.4.2. MAJCOM seek approval for these requests from SAF/MIQ and submits them to DHAC through the DoD ATSDR Liaison.

26.4.3. Health consultations compete for ATSDR and DoD resources; therefore, the AF bases the implementation of health consultations are resource availability as well as need.

26.5. AL/OE can perform health consultations for installations as an alternative to ATSDR.

26.5.1. To request a health consultation by AL/OE, the installation/CC sends a letter to AL/OE, through the MAJCOM/SG, identifying the requirement and time frame for completion.

26.5.2. A copy of the request letter should be sent to HQ AFMOA/SGPA and HQ AFMC/SG.

27. Petitions:

27.1. Private citizens or groups can petition ATSDR for evaluations of perceived public health threats from hazardous waste sites.

27.2. ATSDR evaluates each petition and determines the response action.

27.2.1. Response actions may include health consultations, PHAs, or decisions of no action necessary.

27.3. ATSDR informs DoD of petitions when they are received; however, the petitioner remains anonymous.

27.4. DoD then informs components of the petition.

28. Toxicological Profiles:

28.1. Toxicological profiles for DoD are centrally managed by the DoD Lead Agent with assistance from DoD components.

28.2. Identify requirements for toxicological profiles to AL/OEM.

29. Public Health Emergency Response:

29.1. The AF may request ATSDR assistance in cases of public health emergencies caused, or believed to be caused, by exposure to toxic substances.

29.2. Installation commander submits requests through the MAJCOM/SG.

29.3. Coordinate with HQ AFMOA/SGPA , SAF/MIQ, the DoD Lead Agent, AL/OE, and ATSDR prior to initiating an emergency response.

29.4. Facsimile transmittals of signed requests are sufficient.

29.5. The DoD Lead Agent and ATSDR have final approval authority.

Section C—Suspenses

30. Initial Release PHA Documents. The MAJCOM response to an initial release PHA is due to HQ AFMOA/SGPA no later than ten working days prior to the close of the comment period. ***Note: The AF response is publicly accessible through the Freedom of Information Act (FOIA).***

31. Public Release PHA Documents. The MAJCOM response to a public release PHA is due no later than seven working days prior to the close of the comment period. ***Note: ATSDR includes these comments in the final release PHA.***

32. Final Release PHA Documents. The MAJCOM response to the final release "blue cover" PHA document is due no later than 30 days after release of the document. ***Note: These comments may contribute to addendums to the document.***

33. Extensions to the Initial Release PHA Suspense:

33.1. The ATSDR initial release document comment period is 45 days.

33.2. Extensions to the initial release 45 day response period are possible if processed by the appropriate DoD or AF offices and approved by ATSDR.

33.3. Base commander may request a 15 day extension, endorsed by the MAJCOM/SG, and submitted to ATSDR through HQ AFMOA/SGPA.

33.4. HQ AFMOA/SGPA must receive the request for a 15 day extension from the MAJCOM within 14 days of the original due date.

33.5. Under extreme circumstances and with strong justification, commanders may request an additional 30 day extension (totaling a 45 day extension).

33.6. HQ AFMOA/SGPA must receive this request within 14 working days of the final suspense to ATSDR.

33.7. The DoD Lead Agent will submit to ATSDR if deemed appropriate.

33.8. Facsimile transmittals of signed requests are sufficient.

34. Extensions to Public Comment PHA Suspenses:

34.1. Extensions to the public comment period are not available unless requested by the public and published by ATSDR.

34.2. Request for extensions are not approved until a signed letter is received from ATSDR.

35. Document Updates. Data and informational updates pertinent to PHAs are provided by the installation BEE directly to ATSDR.

Section D—Funding and Programming

36. APOW Activities. The AF will fund ATSDR activities outlined in the APOW MOU.

37. Active Installations:

37.1. Active installations identify and program for ATSDR requirements during their DERA budget submittals.

37.2. The AF normally limits support requirements for ATSDR activities to manpower, travel, and administrative supplies.

37.3. Forward copies of these requirements to the MAJCOM BEE.

38. Inactive Installations:

38.1. AF functional offices at closure bases will identify and program ATSDR requirements during their BRAC budget submittals.

38.2. The AF normally limits support requirements for ATSDR activities to manpower, travel, and administrative supplies.

39. Non-DEIRA, Non-BRAC Activities. Should ATSDR identify a requirement that is not DERA or BRAC eligible, consider the requirement for programming and budgeting in the applicable process.

ALEXANDER M. SLOAN, Lt General, USAF, MC
Surgeon General

Attachment 1

GLOSSARY OF REFERENCES, ABBREVIATIONS, ACRONYMS, AND TERMS

References

AFPD 48-1, *Aerospace Medical Program*

Memorandum of Understanding between the Department of Defense and the Agency for Toxic Substances and Disease Registry, 14 June 1993

Comprehensive Environmental Response, Compensation and Liability Act of 1980

Superfund Amendments and Reauthorization Act of 1986

Abbreviations and Acronyms

AF/CE—Air Force Civil Engineer

AF/SG—Air Force Surgeon General

AFBCA/EV—Air Force Base Closure Agency, Environmental Directorate

AFLSA/JACE—Air Force Legal Services Agency, Air Force Law and Litigation Division

AFMOA/SGPA—Headquarters Air Force Medical Operations, Aerospace Medicine Division

AL/OE—Armstrong Laboratory, Occupational and Environmental Health Directorate

AL/OEM—Armstrong Laboratory, Occupational Medicine Division

APOW—Annual Plan of Work

ARC—Air Reserve Components

ATSDR—Agency for Toxic Substances and Disease Registry

BEE—Bioenvironmental Engineer

BRAC—Base Realignment and Closure

CC—Commander

CE—Civil Engineering

CEVR—Civil Engineering, Environmental Restoration

CERCLA—Comprehensive Environmental Response, Compensation and Liability Act of 1980

DERA—Defense Environmental Restoration Account

DERP—Defense Environmental Restoration Program

DHAC—Division of Health Assessment and Consultation

DoD—Department of Defense

DRU—Direct Reporting Unit

EM—Environmental Management

EPA—Environmental Protection Agency

FOA—Field Operating Agency

FOIA—Freedom of Information Act

GOCO—Government Owned-Contractor Operated

IRP—Installation Restoration Program

JA—Judge Advocate

MAJCOM—Major Command

MOU—Memorandum of Understanding

NPL—National Priorities List

PA—Public Affairs

PH—Public Health

PHA—Public Health Assessment

POC—Point of Contact

PPBS—Planning, Programming, and Budgeting System

SAF/MIQ—The Deputy Assistant Secretary of the Air Force (Environmental, Safety, and Occupational Health)

SARA—Superfund Amendments and Reauthorization Act of 1986

USAFSAM/BE—United States Air Force School of Aerospace Medicine, Bioenvironmental Engineering

Terms

Health Consultations—Focused assessments designed to address specific public health concerns, pertaining to hazardous substances or a hazardous waste site. Public health assessments and health consultations can lead to other Agency for Toxic Substances and Disease Registry activities (e.g., health studies, health education, etc.).

Public Health Assessment (PHA)—Complex evaluations based on site visits, environmental data, health outcome data, and public health concerns which determines if a hazardous waste site has a past, present, or potential future adverse effect on human health. May be used to develop health advisories, or identify studies and actions needed to evaluate, mitigate or prevent adverse human health effects.

"Red," "Brown" and "Blue" Cover—Agency for Toxic Substances and Disease Registry initial, public comment, and final release documents. Public Health Assessment documents are also referred to as "red", "brown" and "blue" cover documents, respectively.

Toxicological Profiles—Specific evaluations of toxicological data on hazardous substances.